

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		50	2/2/01
FORMALITY REVIEW	KL	1019	03/07/01
RESPONSE FORMALITY REVIEW	71	905	6/28/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	510	4
2	✓	1320	030
3	✓	0303	04
4	✓	11	
5	✓	11	
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49	✓	11	
50	✓	11	

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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H.S.  
 3-7-01